

Serial No. 10/075,284

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REMARKS

The Applicants request reconsideration of the rejection.  
Claims 1-4 are now pending.

Claims 1-5 were rejected under 35 U.S.C. § 103(a) as  
being unpatentable over Acker et al U.S. Patent No. 6,508,774  
(Acker).

A fundamental difference between the disclosure of Acker  
and the invention as presently claimed is that Acker's high-  
intensity focused ultrasound application requires avoidance of  
cavitation at the time point that cavitation is detected,  
whereas the claimed invention employs the cavitation in the  
therapeutic application of ultrasound.

Turning to Acker, note the following passages: Abstract,  
lines 7-9; column 2, line 64 through column 3, line 5; column  
3, lines 28-36; column 4, lines 22-26 and 30-38; column 4,  
line 65 through column 5, line 7; column 5, lines 25-30;  
column 9, lines 48-52 and 61-64; and column 10, lines 11-48.

In contrast, as set forth in the present specification  
from page 6, line 18 to page 7, line 4; page 8, line 9 to page  
9, line 4; and page 22, line 20 to page 23, line 7 (for  
example), the present invention takes advantage of ultrasound  
reflecting from the cavitation bubble to enhance the  
therapeutic application of the ultrasound. Accordingly,  
independent claim 1 has been amended to clarify that the

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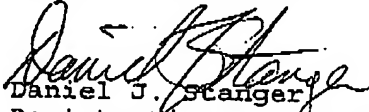
setting means sets a continuous insonation time according to which the ultrasonic transducer irradiates the therapeutic ultrasound on the exposed region while the exposed region is experiencing cavitation, from a point of time of detection of the cavitation. Independent claim 4 has been amended to recite setting means that sets a continuous insonation time according to which the ultrasonic transducer irradiates the therapeutic ultrasound on the exposed region while the exposed region is generating an audible sound, from point of time of detection of the audible sound. As noted in the passages mentioned above, in every embodiment disclosed by Acker, the detected cavitation is avoided by either terminating the application of ultrasound to the site of cavitation, reducing the energy of the ultrasound to dissipate the cavitation, or moving the focal point of the ultrasound application away from the site of cavitation. By doing so, Acker achieves the stated goal of avoiding cavitation at the site of ultrasound application.

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In view of the foregoing remarks and amendments,  
Applicants request reconsideration of the rejection and  
allowance of the claims.

Respectfully submitted,

  
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